Senate HHS Committee: Interim Charge #12

Community MHMR Centers of Texas

Danette Castle, Texas Council







Texas MHMR Act of 1965

- Authorized local taxing authorities (counties, cities, school & hospital districts) to organize a local service area and create a locally governed Community Center;
- Provided catalyst to develop statewide communitybased services for people with intellectual disabilities;
- Established enduring partnership between Local, State and Federal Government.



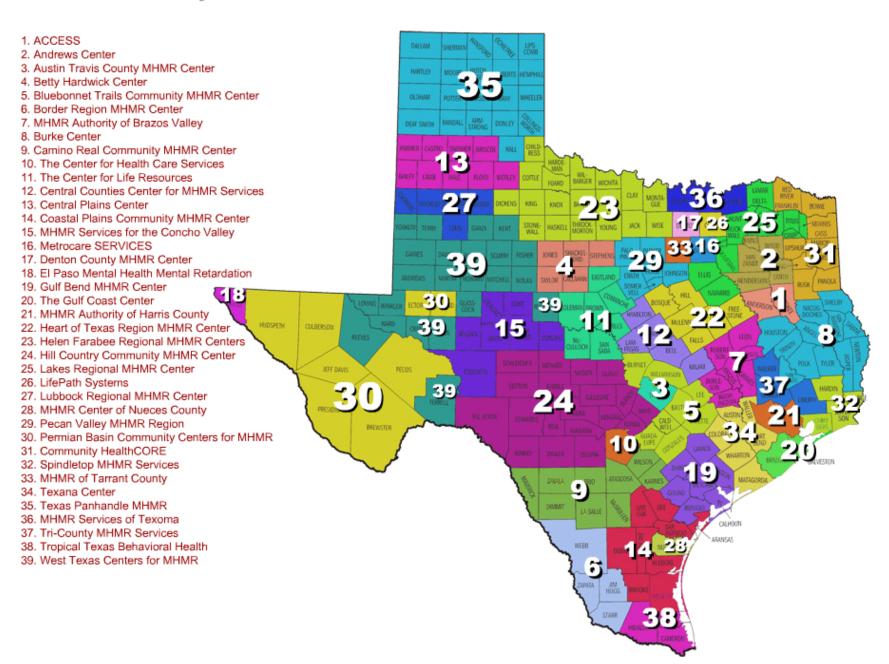


Texas Council of Community MHMR Centers

- Formed in 1976 to support and represent the locally governed system of care;
- To advance public policy & legislation that supports the public mission of the Community Centers.



Texas Community MHMR Center Service Areas





Texas Community MHMR Centers

- General Revenue Funded Services
- Intermediate Care Facilities (ICF)
- Home & Community Services (HCS)
- Texas Home Living (TxHML)





Texas Community MHMR Centers

- MRA Role: created in response to settlement of [Lelsz] lawsuit
- Single Point of Access (front door) to ICF, HCS
 & TxHML Waiver (Medicaid funded)
- Service Coordination (access to needed medical & social services)
- Community Safety Net (GR Funded)





HB 2439 [80th Session] Clarifies Texas Health & Safety Code

- Section 533.035 establishes limitation on provider role of the MRA
- Section 533.0355 describes responsibilities of the MRA





Texas Health & Safety Code Section 533.0355: MRA Functions

- Access
- Intake
- Eligibility Functions
- Enrollment
- Utilization Management
- Safety Net
- Service Coordination
- Oversight of GR Funded Services
- Local Planning
- Accountability Processes





MRA Functions

Single Point of Access

- Eligibility Determination (diagnostic & functional assessment)
- Explanation of Service Options
- Identification of Service Preferences
- Enrollment (ICF, HCS, TxHML)
- HCS Interest List





- Community Living Options Information Process (CLOIP) in State Supported Living Centers
- Permanency Planning for Children
- Continuity of Care (from SSLCs to Community)
- Closure or decertification of HCS Provider





As a Community Safety Net

- Organized to provide services for a vulnerable population that would not otherwise have access to critical services;
- Statutorily directed to provide services (within available resources) regardless of ability to pay;
- GR funds (including In Home & Family Support) offer basic access to essential services.





Community Safety Net Services (GR Funded)

- Respite
- Employment Assistance
- Supported Employment
- Nursing
- Behavioral Support
- Specialized Therapies
- Vocational Training
- Day Habilitation





- HCS Total Enrolled
 - 16,827 (12.31.09)
- HCS Interest List Reduction
 - 2741 people (FY06 & FY07)
 - 3716 people (FY08 & FY09)
 - 1032 people (To Date: FY10)
- HCS Current Interest List
 - 42,360 people (8.31.09)





SB 1, Section 48 (81st Session) Reshaping the System of Care

- Provides \$207 million GR for HCS
 - Funding contingent on transfer of CM from HCS to the MRA
 - Census management approach for State Supported Living Centers
 - Managed Care Study
- 7,832 additional people to receive waiver services
- HCS services for people leaving large & medium ICFs, children out of foster care and those at risk of institutionalization
- Safety Net funds partially restored (from cuts in 78th Legislative Session, 2003)





Independent Service Coordination: A Unique Role

- Ensures people understand options
- Provides comprehensive view of services and supports
- Provides local monitoring and oversight
- Provides support negotiating services & problem solving
- Partnership with providers





Evaluate, refine & comprehensively manage:

- 1. Tiered system currently in place
- 2. Reshaping of the system currently underway
- 3. The universe of services supporting people with Intellectual Disabilities





Tiered system currently in place

- Safety Net (GR)
- Texas Home Living
- Home & Community Services (HCS)
 - Supported Home Living
 - Foster Care
 - Residential
- ICF/MR (Community)
- ICF/MR (State Supported Living Centers)





Reshaping the System of Care

- Census Management
- MRA Case Management
- Person Directed Planning (Renewed Emphasis)
 - Self-Determination (who, what, when, where & how)
 - Encourages individual responsibility & natural supports
 - Encourages use of less expensive alternatives
 - Improves satisfaction
 - Outcome Based
 - Cost Effective





Evaluate service delivery patterns & utilization data across the service system that supports people with Intellectual & Developmental Disabilities and recommend strategies that ensure:

- individuals receive the services they want & need in appropriate settings that provide best value;
- Service delivery is flexible and affords options over time;
- Provider rates & reimbursement methodologies align with desired outcomes (quality of care & cost effective).





The unexamined life is not worth living.

—Socrates

